

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF MINNESOTA

Case number (if known) Chapter 11

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/20

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Eagle Manufacturing, Inc.

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and doing business as names

FKA Northwest Manufacturing, Inc.

3. Debtor's federal Employer Identification Number (EIN) 41-1672617

4. Debtor's address

Principal place of business

Mailing address, if different from principal place of business

600 Polk Ave SW
Red Lake Falls, MN 56750

Number, Street, City, State & ZIP Code

P.O. Box, Number, Street, City, State & ZIP Code

Red Lake

County

Location of principal assets, if different from principal place of business

Number, Street, City, State & ZIP Code

5. Debtor's website (URL)

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify:

Debtor **Eagle Manufacturing, Inc.**
Name

Case number (if known)

7. Describe debtor's business**A. Check one:**

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?**Check one:**

- ☐ Chapter 7
- ☐ Chapter 9

☒ Chapter 11. **Check all that apply:**

A debtor who is a "small business debtor" must check the first sub-box. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box.

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☒ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11.** If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

| | | | | | |
|----------|-------|------|-------|-------------|-------|
| District | _____ | When | _____ | Case number | _____ |
| District | _____ | When | _____ | Case number | _____ |

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- ☒ No
- ☐ Yes.

List all cases. If more than 1, attach a separate list

| | | | |
|----------|-------|-----------------------|-------|
| Debtor | _____ | Relationship | _____ |
| District | _____ | When | _____ |
| | | Case number, if known | _____ |

Debtor **Eagle Manufacturing, Inc.**
Name

Case number (if known)

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard?

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other

Where is the property?

Number, Street, City, State & ZIP Code

Is the property insured?

☐ No

☐ Yes. Insurance agency

Contact name

Phone

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

☐ 1-49

☐ 50-99

☒ 100-199

☐ 200-999

☐ 1,000-5,000

☐ 5001-10,000

☐ 10,001-25,000

☐ 25,001-50,000

☐ 50,001-100,000

☐ More than 100,000

15. Estimated Assets

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☒ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

16. Estimated liabilities

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☒ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

Debtor **Eagle Manufacturing, Inc.**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **November 6, 2020**
MM / DD / YYYY

X /s/ Ronald Gagner
Signature of authorized representative of debtor

Title **CFO**

Ronald Gagner
Printed name

18. Signature of attorney

X /s/ Kenneth C. Edstrom
Signature of attorney for debtor

Date **November 6, 2020**
MM / DD / YYYY

Kenneth C. Edstrom 148696
Printed name

Sapientia Law Group
Firm name

120 S 6th St Ste 100
Minneapolis, MN 55402
Number, Street, City, State & ZIP Code

Contact phone **6127567100**

Email address **kene@sapientialaw.com**

148696 MN
Bar number and State

Fill in this information to identify the case:

Debtor name Eagle Manufacturing, Inc.

United States Bankruptcy Court for the: DISTRICT OF MINNESOTA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☐ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☐ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☐ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☐ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on November 6, 2020

X /s/ Ronald Gagner

Signature of individual signing on behalf of debtor

Ronald Gagner

Printed name

CFO

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **Eagle Manufacturing, Inc.**
 United States Bankruptcy Court for the: **DISTRICT OF MINNESOTA**
 Case number (if known): _____

☐ Check if this is an amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

| Name of creditor and complete mailing address, including zip code | Name, telephone number and email address of creditor contact | Nature of claim (for example, trade debts, bank loans, professional services, and government contracts) | Indicate if claim is contingent, unliquidated, or disputed | Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim. | | |
|---|--|---|--|--|---|-----------------|
| | | | | Total claim, if partially secured | Deduction for value of collateral or setoff | Unsecured claim |
| Northern Plains Steel 3801 15th Ave North Fargo, ND 58102 | | | | | | \$273,669.20 |
| Taco, Inc. PO Box 845637 Boston, MA 02284-5637 | | | | | | \$177,307.23 |
| Small Business Administration 14925 Kingsport Rd Fort Worth, TX 76155 | | PPP Loan (forgiveness applied for) | | | | \$133,100.00 |
| St Hilaire Supply Co. 211 Broadway Ave N St Hilaire, MN 56754 | | | | | | \$121,267.53 |
| Northland Steel & Trim 9262 93rd Ave SE Fullerton, ND 58441-9774 | | | | | | \$75,546.93 |
| P-Tech USA 1632 Hobbs Dr, Unit B Delavan, WI 53115 | | | | | | \$57,763.33 |
| US Bank PO Box 108 St. Louis, MO 63166-0108 | | Company account with multiple cardholders. 308,721 travel points balance. | | | | \$50,952.00 |
| H-O-H Water Technology, Inc. PO Box 487 Palatine, IL 60078-0487 | | | | | | \$43,300.55 |

Debtor **Eagle Manufacturing, Inc.**
Name

Case number (if known)

| Name of creditor and complete mailing address, including zip code | Name, telephone number and email address of creditor contact | Nature of claim (for example, trade debts, bank loans, professional services, | Indicate if claim is contingent, unliquidated, or disputed | Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim. | | |
|--|--|---|--|--|---|-----------------|
| | | | | Total claim, if partially secured | Deduction for value of collateral or setoff | Unsecured claim |
| Young Mfg, Inc. 2331 N 42nd St Grand Forks, ND 58203 | | | | | | \$34,530.09 |
| Selkirk Corporation PO Box 732689 Dallas, TX 75373-2689 | | | | | | \$32,503.23 |
| Badger Insulated Pipe LLC W8359 State Rd 82 W Mauston, WI 53948 | | | | | | \$32,270.00 |
| Emerson Comm'l & Res Solutions 1065 Big Shanty Rd NW Kennesaw, GA 30144-7038 | | | | | | \$20,054.70 |
| Heat Transfer Group, Inc. 2211-C Fifth Avenue Ronkonkoma, NY 11779 | | | | | | \$18,474.08 |
| Red Lake County Treasurer PO Box 208 Red Lake Falls, MN 56750 | | 2020 Property taxes on company properties. | | | | \$16,718.00 |
| HeatLink Group, Inc. 1774 Paysphere Circle Chicago, IL 60674 | | | | | | \$15,878.43 |
| Hartz Truck Line, Inc. 124 S State St Thief River Falls, MN 56701 | | | | | | \$15,500.00 |
| American Express PO Box 53779 Phoenix, AZ 85027 | | Corporate account with multiple cardholders. Rewards Points balance 8584 | | | | \$14,767.00 |
| Grainger Dept. 823283601 Palatine, IL 60038-0001 | | | | | | \$13,804.63 |
| FedEx Freight East PO Box 10306 Palatine, IL 60055-0306 | | | | | | \$11,628.14 |

Debtor **Eagle Manufacturing, Inc.** Case number (if known) _____
Name

| Name of creditor and complete mailing address, including zip code | Name, telephone number and email address of creditor contact | Nature of claim (for example, trade debts, bank loans, professional services, | Indicate if claim is contingent, unliquidated, or disputed | Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim. | | |
|--|--|---|--|--|---|-----------------|
| | | | | Total claim, if partially secured | Deduction for value of collateral or setoff | Unsecured claim |
| CSA Group Testing & Cert. Inc. PO Box 74007292 Chicago, IL 60674-7292 | | | | | | \$11,608.75 |

Fill in this information to identify the case:

Debtor name **Eagle Manufacturing, Inc.**

United States Bankruptcy Court for the: **DISTRICT OF MINNESOTA**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

| | |
|---|------------------------|
| 1a. Real property: Copy line 88 from <i>Schedule A/B</i> | \$ 1,275,000.00 |
| 1b. Total personal property: Copy line 91A from <i>Schedule A/B</i> | \$ 4,221,035.11 |
| 1c. Total of all property: Copy line 92 from <i>Schedule A/B</i> | \$ 5,496,035.11 |

Part 2: Summary of Liabilities

| | |
|--|-------------------------|
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i> | \$ 1,214,059.56 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F) | |
| 3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i> | \$ 20,694.83 |
| 3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i> | +\$ 1,882,622.38 |
| 4. Total liabilities Lines 2 + 3a + 3b | \$ 3,117,376.77 |

Fill in this information to identify the case:Debtor name **Eagle Manufacturing, Inc.**United States Bankruptcy Court for the: **DISTRICT OF MINNESOTA**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**☐ No. Go to Part 2.☒ Yes Fill in the information below.**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

Checking Account: Ultima Bank
MN-Amount is estimate from recent
check on balance. Amount fluctuates
daily

3.1.

\$4,000.00

US Bank-amount is estimate from
recent review of balance. Balance
changes daily.

3.2.

checking**\$350.00**

Canadian Bank-amount is estimate
from recent review of balance. Balance
changes daily.

3.3.

Checking**\$275.00**

Paypal-amount is estimate from recent
review of balance. Balance changes
daily.

3.4.

\$300.00**4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$4,925.00**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

Debtor Eagle Manufacturing, Inc. Case number (If known) _____
Name

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☐ No. Go to Part 4.
☒ Yes Fill in the information below.

11. Accounts receivable

11a. 90 days old or less: 94,830.75 - 0.00 = \$94,830.75
face amount doubtful or uncollectible accounts

11a. 90 days old or less: 23,000.00 - 0.00 = \$23,000.00
face amount doubtful or uncollectible accounts

12. Total of Part 3.

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$117,830.75

Part 4: Investments

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.
☒ Yes Fill in the information below.

| | General description | Date of the last physical inventory | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|-----|---|-------------------------------------|---|---|------------------------------------|
| 19. | Raw materials Inventory at book value | January 2020 | \$0.00 | | \$865,265.87 |
| 20. | Work in progress Finished Goods - At Book Value | | \$233,423.05 | | \$233,423.05 |
| 21. | Finished goods, including goods held for resale Goods-at book value. | | \$0.00 | | \$707,636.33 |
| 22. | Other inventory or supplies Other Inventory-at book value. | | \$0.00 | | \$287,591.57 |

Debtor Eagle Manufacturing, Inc. Case number (If known) _____
Name

Inventory/Returns-at
book value \$0.00 \$123,976.73

23. **Total of Part 5.** **\$2,217,893.55**
Add lines 19 through 22. Copy the total to line 84.

24. **Is any of the property listed in Part 5 perishable?**

- ☒ No
☐ Yes

25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**

- ☒ No
☐ Yes. Book value _____ Valuation method _____ Current Value _____

26. **Has any of the property listed in Part 5 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

| | General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|-----|---|--|---|------------------------------------|
| 39. | Office furniture Book Value before depreciation. | <u>\$0.00</u> | | <u>\$131,005.86</u> |
| 40. | Office fixtures | | | |
| 41. | Office equipment, including all computer equipment and communication systems equipment and software Book Value before depreciation | <u>\$0.00</u> | | <u>\$316,317.44</u> |
| | Other Equipment - Book Value before depreciation | <u>\$0.00</u> | | <u>\$975,316.23</u> |
| | Tooling at book value before depreciation | <u>\$0.00</u> | | <u>\$207,904.24</u> |

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.** **\$1,630,543.77**
Add lines 39 through 42. Copy the total to line 86.

Debtor Eagle Manufacturing, Inc. Case number (If known) _____
Name

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☒ No
☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.
☒ Yes Fill in the information below.

| | General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number) | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|-------|--|---|--|---------------------------------------|
| 47. | Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles | | | |
| 47.1. | Vehicle: Company Truck | \$0.00 | | \$24,000.00 |
| 47.2. | Vehicle: Company Trailer | \$0.00 | | \$6,500.00 |
| 48. | Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels | | | |
| 49. | Aircraft and accessories | | | |
| 50. | Other machinery, fixtures, and equipment (excluding farm machinery and equipment) | | | |
| | Value shown at liquidation, book value | | | |
| | \$350,000 | \$0.00 | | \$217,000.00 |

51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$247,500.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☒ No
☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☐ No. Go to Part 10.
☒ Yes Fill in the information below.

55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

| Description and location of property Include street address or other | Nature and extent of debtor's interest | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|--|---|--|---------------------------------------|
|--|--|---|--|---------------------------------------|

Debtor Eagle Manufacturing, Inc. Case number (If known) _____

Name

description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).

in property

55.1.

Other: Business Property

\$0.00

\$1,275,000.00

56. **Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$1,275,000.00

57. **Is a depreciation schedule available for any of the property listed in Part 9?**

☒ No

☐ Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

☒ No

☐ Yes

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

☒ No. Go to Part 11.

☐ Yes Fill in the information below.

Part 11: All other assets

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☐ No. Go to Part 12.

☒ Yes Fill in the information below.

Current value of debtor's interest

71. **Notes receivable**

Description (include name of obligor)

72. **Tax refunds and unused net operating losses (NOLs)**

Description (for example, federal, state, local)

73. **Interests in insurance policies or annuities**

Insurance: \$1,000,000 Term Life - Insured - Bruce Gagner

\$0.00

Insurance: 1,000,000 Term Life - Insured - Ron Gagner

\$0.00

Prepaid Insurance

\$2,342.04

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**

Debtor Eagle Manufacturing, Inc. Case number (If known) _____

Name

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** *Examples:* Season tickets, country club membership

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$2,342.04

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

☒ No

☐ Yes

Debtor Eagle Manufacturing, Inc. Case number (If known) _____
Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

| Type of property | Current value of personal property | Current value of real property |
|---|------------------------------------|--------------------------------|
| 80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i> | \$4,925.00 | |
| 81. Deposits and prepayments. <i>Copy line 9, Part 2.</i> | \$0.00 | |
| 82. Accounts receivable. <i>Copy line 12, Part 3.</i> | \$117,830.75 | |
| 83. Investments. <i>Copy line 17, Part 4.</i> | \$0.00 | |
| 84. Inventory. <i>Copy line 23, Part 5.</i> | \$2,217,893.55 | |
| 85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i> | \$0.00 | |
| 86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i> | \$1,630,543.77 | |
| 87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i> | \$247,500.00 | |
| 88. Real property. <i>Copy line 56, Part 9.....></i> | | \$1,275,000.00 |
| 89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i> | \$0.00 | |
| 90. All other assets. <i>Copy line 78, Part 11.</i> | \$2,342.04 | |
| 91. Total. Add lines 80 through 90 for each column | \$4,221,035.11 | \$1,275,000.00 |
| 92. Total of all property on Schedule A/B. Add lines 91a+91b=92 | | \$5,496,035.11 |

Fill in this information to identify the case:

Debtor name **Eagle Manufacturing, Inc.**

United States Bankruptcy Court for the: **DISTRICT OF MINNESOTA**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

| | | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | |
|-----|--|---|--|----------------|
| 2.1 | Northwest Regional Development <small>Creditor's Name</small> 109 S. Minnesota St. Warren, MN 56762 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority. | Describe debtor's property that is subject to a lien Blanket Lien Berhind Ultima Bank Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | \$134,909.00 | Unknown |

| | | | | |
|-----|---|--|---------------------|-----------------------|
| 2.2 | Ultima Bank MN <small>Creditor's Name</small> 603 Hilligoss Blvd. SE Fosston, MN 56542 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred 10/2/2017 Last 4 digits of account number 1445 Do multiple creditors have an interest in the same property? | Describe debtor's property that is subject to a lien Other: Business Property Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply | \$394,448.22 | \$1,275,000.00 |
|-----|---|--|---------------------|-----------------------|

Debtor **Eagle Manufacturing, Inc.**

Case number (if known)

☐ No

☒ Yes. Specify each creditor, including this creditor and its relative priority.

1. Ultima Bank MN
2. Ultima Bank MN
3. Ultima Bank, MN

☐ Contingent

☐ Unliquidated

☐ Disputed

2.3 Ultima Bank MN

Creditor's Name

603 Hilligoss Blvd. SE
Fosston, MN 56542

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

02/4/2020

Last 4 digits of account number

3503

Do multiple creditors have an interest in the same property?

☐ No

☒ Yes. Specify each creditor, including this creditor and its relative priority.

Specified on line 2.2

Describe debtor's property that is subject to a lien

Other: Business Property

\$671,481.61

\$1,275,000.00

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

2.4 Ultima Bank, MN

Creditor's Name

603 Hilligoss Blvd. SE
Fosston, MN 56542

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

02/4/2020

Last 4 digits of account number

1444

Do multiple creditors have an interest in the same property?

☐ No

☒ Yes. Specify each creditor, including this creditor and its relative priority.

Specified on line 2.2

Describe debtor's property that is subject to a lien

Other: Business Property

\$13,220.73

\$1,275,000.00

Describe the lien

Mortgage 3rd

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$1,214,059.56

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Debtor **Eagle Manufacturing, Inc.** Case number (if known) _____
Name

| Name and address | On which line in Part 1 did you enter the related creditor? | Last 4 digits of account number for this entity |
|------------------|---|---|
|------------------|---|---|

Fill in this information to identify the case:

Debtor name **Eagle Manufacturing, Inc.**

United States Bankruptcy Court for the: **DISTRICT OF MINNESOTA**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

| | | Total claim | Priority amount |
|-----|---|--|---|
| 2.1 | <p>Priority creditor's name and mailing address</p> <p>employees of debtor</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (5)</p> | <p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Payments for employee benefits are current.</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> | <p>\$2,446.83</p> <p>\$2,446.83</p> |
| 2.2 | <p>Priority creditor's name and mailing address</p> <p>Red Lake County Treasurer PO Box 208 Red Lake Falls, MN 56750</p> <p>Date or dates debt was incurred</p> <p>05/15/2020</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p> | <p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>2020 Property taxes on company properties.</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> | <p>\$16,718.00</p> <p>\$0.00</p> |

| | | |
|--------|---|------------------------|
| Debtor | Eagle Manufacturing, Inc. <small>Name</small> | Case number (if known) |
|--------|---|------------------------|

| | | | | |
|-----|---|--|-------------------|---------------|
| 2.3 | Priority creditor's name and mailing address State of Minnesota 600 North Robert St. St. Paul, MN 55101 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | \$1,530.00 | \$0.00 |
|-----|---|--|-------------------|---------------|

| | |
|--|--|
| Date or dates debt was incurred 09/15/2020 | Basis for the claim: S Corp Estimated Taxes for 2020 |
|--|--|

| | |
|---|---|
| Last 4 digits of account number 7EIN | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
|---|---|

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

| | | | Amount of claim |
|-----|--|---|-------------------|
| 3.1 | Nonpriority creditor's name and mailing address 3M Center PO Box 844127 Dallas, TX 75284-4127 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$588.00 |
| 3.2 | Nonpriority creditor's name and mailing address Accurate Fastening Solutions 9775 85th ave N Maple Grove, MN 55369 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,676.27 |
| 3.3 | Nonpriority creditor's name and mailing address Advanced Tire & Auto 323 N Broadway Crookston, MN 56716 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,529.91 |
| 3.4 | Nonpriority creditor's name and mailing address Advncd Bus. Methods 1515 13th Ave E West Fargo, ND 58078 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,259.23 |
| 3.5 | Nonpriority creditor's name and mailing address AIS PO Box 86 Minneapolis, MN 55486 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,510.94 |

| | | |
|--------|---|------------------------|
| Debtor | Eagle Manufacturing, Inc. <small>Name</small> | Case number (if known) |
|--------|---|------------------------|

| | | | |
|-----|---|--|--------------------|
| 3.6 | Nonpriority creditor's name and mailing address American Express PO Box 53779 Phoenix, AZ 85027 Date(s) debt was incurred <u>Date Opened: 01/1/2001</u> Last Used: 11/4/2020 Last 4 digits of account number <u>3007</u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Corporate account with multiple cardholders. Rewards Points balance 8584</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$14,767.00 |
|-----|---|--|--------------------|

| | | | |
|-----|---|--|-------------------|
| 3.7 | Nonpriority creditor's name and mailing address American Sealants Inc. 9190 Yeager Lane Fort Wayne, IN 46809 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,922.40 |
|-----|---|--|-------------------|

| | | | |
|-----|---|--|-------------------|
| 3.8 | Nonpriority creditor's name and mailing address AmeriPride PO Box 950 Bemidji, MN 56619-0950 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,262.93 |
|-----|---|--|-------------------|

| | | | |
|-----|--|--|-------------------|
| 3.9 | Nonpriority creditor's name and mailing address Assoc. Graphic Arts, Inc. 820 5th St NW Faribault, MN 55021 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,138.23 |
|-----|--|--|-------------------|

| | | | |
|------|--|--|-----------------|
| 3.10 | Nonpriority creditor's name and mailing address AT&T Mobility PO Box 6463 Carol Stream, IL 60197-6463 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$254.52 |
|------|--|--|-----------------|

| | | | |
|------|--|--|-----------------|
| 3.11 | Nonpriority creditor's name and mailing address Auto Value PO Box 127 Red Lake Falls, MN 56750-0127 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$703.71 |
|------|--|--|-----------------|

| | | | |
|------|---|--|-------------------|
| 3.12 | Nonpriority creditor's name and mailing address Baco Controls 8431 Loop Road Baldwinsville, NY 13027 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,194.36 |
|------|---|--|-------------------|

| | | |
|--------|---|------------------------------|
| Debtor | Eagle Manufacturing, Inc. <small>Name</small> | Case number (if known) _____ |
|--------|---|------------------------------|

| | | | |
|------|---|---|--------------------|
| 3.13 | Nonpriority creditor's name and mailing address Badger Insulated Pipe LLC W8359 State Rd 82 W Mauston, WI 53948 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$32,270.00 |
| 3.14 | Nonpriority creditor's name and mailing address BBI International 308 2nd Ave N, Ste 304 Grand Forks, ND 58203 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,291.35 |
| 3.15 | Nonpriority creditor's name and mailing address Becker Agg. Trucking, Inc. PO Box 249 Pierz, MN 56364 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,954.10 |
| 3.16 | Nonpriority creditor's name and mailing address Bellofram Silicones, Inc. PO Box 74733 Cleveland, OH 44194-4733 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,177.97 |
| 3.17 | Nonpriority creditor's name and mailing address Brean Marketing Inc. 880 - 330 St. Mary Ave. Winnipeg, MB R3C 3Z5 Canada Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,499.37 |
| 3.18 | Nonpriority creditor's name and mailing address Chicago Tube & Iron PO Box 1450 Minneapolis, MN 05548-5126 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,227.64 |
| 3.19 | Nonpriority creditor's name and mailing address Cincinnati Fan c/o Glacier Tech Inc. PO Box 640338 Cincinnati, OH 45264-0338 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,705.14 |

| | | |
|--------|---|------------------------------|
| Debtor | Eagle Manufacturing, Inc. <small>Name</small> | Case number (if known) _____ |
|--------|---|------------------------------|

| | | | |
|------|--|--|-----------------|
| 3.20 | Nonpriority creditor's name and mailing address Climattech 6950 Washington Ave S Eden Prairie, MN 55344 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$272.06 |
|------|--|--|-----------------|

| | | | |
|------|--|--|-----------------|
| 3.21 | Nonpriority creditor's name and mailing address Creditsafe USA Inc. PO Box 789985 Philadelphia, PA 19178-9985 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$662.50 |
|------|--|--|-----------------|

| | | | |
|------|--|--|--------------------|
| 3.22 | Nonpriority creditor's name and mailing address CSA Group Testing & Cert. Inc. PO Box 74007292 Chicago, IL 60674-7292 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$11,608.75 |
|------|--|--|--------------------|

| | | | |
|------|--|--|-------------------|
| 3.23 | Nonpriority creditor's name and mailing address Diamond Vogel Paints PO Box 380 Orange City, IA 51041 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,035.05 |
|------|--|--|-------------------|

| | | | |
|------|--|--|-------------------|
| 3.24 | Nonpriority creditor's name and mailing address Digi-Key AR 748033 Thief River Falls, MN 56701-0250 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,940.70 |
|------|--|--|-------------------|

| | | | |
|------|--|--|-------------------|
| 3.25 | Nonpriority creditor's name and mailing address DuBois Chemicals Inc. 2659 Solution Center Chicago, IL 60677-2006 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,661.68 |
|------|--|--|-------------------|

| | | | |
|------|--|--|-------------------|
| 3.26 | Nonpriority creditor's name and mailing address Easy Heat Wood Pellets PO Box 15 Dublin, OH 43017 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,210.00 |
|------|--|--|-------------------|

| | | |
|--------|---|------------------------------|
| Debtor | Eagle Manufacturing, Inc. <small>Name</small> | Case number (if known) _____ |
|--------|---|------------------------------|

| | | |
|------|---|--|
| 3.27 | Nonpriority creditor's name and mailing address Emerson Comm'l & Res Solutions 1065 Big Shanty Rd NW Kennesaw, GA 30144-7038 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$20,054.70 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
|------|---|--|

| | | |
|------|--|---|
| 3.28 | Nonpriority creditor's name and mailing address Falcon Industries, Inc. PO Box 74350 Cleveland, OH 44194-4350 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$650.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
|------|--|---|

| | | |
|------|---|---|
| 3.29 | Nonpriority creditor's name and mailing address Fastenal Company PO Box 1286 Winona, MN 55987-0978 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,578.58 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
|------|---|---|

| | | |
|------|--|--|
| 3.30 | Nonpriority creditor's name and mailing address FedEx Freight East PO Box 10306 Palatine, IL 60055-0306 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$11,628.14 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| 3.31 | Nonpriority creditor's name and mailing address Fischer, Rust, & Stock, PLLC PO Box 605 Crookston, MN 56716 Date(s) debt was incurred <u>03/13/2020</u> Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,873.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>legal services for asset sales, set up escrow account and escrow agent.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| 3.32 | Nonpriority creditor's name and mailing address Forklifts of MN, Inc. 2201 W 94th St Bloomington, MN 55431 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,751.48 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| 3.33 | Nonpriority creditor's name and mailing address FourMation Sales PO Box 602903 Charlotte, NC 28260-2903 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$357.85 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| Debtor | Eagle Manufacturing, Inc. <small>Name</small> | Case number (if known) _____ |
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| 3.34 | Nonpriority creditor's name and mailing address Grainger Dept. 823283601 Palatine, IL 60038-0001 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$13,804.63 |
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| 3.35 | Nonpriority creditor's name and mailing address Graybar 12437 Collections Ctr Dr Chicago, IL 60693-2437 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$817.44 |
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| 3.36 | Nonpriority creditor's name and mailing address Greater Bay Capital PO Box 7777 San Francisco, CA 94120-7777 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$708.75 |
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| 3.37 | Nonpriority creditor's name and mailing address H-O-H Water Technology, Inc. PO Box 487 Palatine, IL 60078-0487 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$43,300.55 |
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| 3.38 | Nonpriority creditor's name and mailing address Hartz Truck Line, Inc. 124 S State St Thief River Falls, MN 56701 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$15,500.00 |
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| 3.39 | Nonpriority creditor's name and mailing address Heat Transfer Group, Inc. 2211-C Fifth Avenue Ronkonkoma, NY 11779 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$18,474.08 |
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| 3.40 | Nonpriority creditor's name and mailing address HeatLink Group, Inc. 1774 Paysphere Circle Chicago, IL 60674 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$15,878.43 |
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| Debtor | Eagle Manufacturing, Inc. <small>Name</small> | Case number (if known) _____ |
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| 3.41 | Nonpriority creditor's name and mailing address Insul-Seal Insulated PVC 217 Harrison St N Racine, MI 55967 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,471.00 |
| 3.42 | Nonpriority creditor's name and mailing address JM Stofteknik AB Martensgatan 8, 504 41 Boras, Sweden Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,302.00 |
| 3.43 | Nonpriority creditor's name and mailing address Johnstone Supply 1840 Industrial Blvd. Muskegon, MI 49442-6112 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$5,166.02 |
| 3.44 | Nonpriority creditor's name and mailing address KTRF Radio PO Box 40 Thief River Falls, MN 56701 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,450.00 |
| 3.45 | Nonpriority creditor's name and mailing address Lapham-Hickey Steel LockBox 774752 Chicago, IL 60677-4007 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$439.09 |
| 3.46 | Nonpriority creditor's name and mailing address M.G.M. Elec Motors USA Inc. 24715 Crestview Court Farmington Hills, MI 48335 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$457.95 |
| 3.47 | Nonpriority creditor's name and mailing address Master Electronics PO Box 512639 Los Angeles, CA 90051-0639 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$6,549.32 |

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| Debtor | Eagle Manufacturing, Inc. <small>Name</small> | Case number (if known) _____ |
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| 3.48 | Nonpriority creditor's name and mailing address McMaster-Carr Supply Comp. PO Box 7690 Chicago, IL 60680-7690 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$880.91 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| 3.49 | Nonpriority creditor's name and mailing address Menards 3550 32ND Ave S. Grand Forks, ND 58201-5914 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$7,840.98 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| 3.50 | Nonpriority creditor's name and mailing address Meta 13 20 N Benton Dr Sauk Rapids, MN 56379 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$25.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| 3.51 | Nonpriority creditor's name and mailing address Midway Industrial Supply Co. PO Box 73278 Cleveland, OH 44193 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$715.44 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| 3.52 | Nonpriority creditor's name and mailing address Midwest Tank Co. 17368 197th Ave. Big Lake, Minnesota 55309-0000 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| 3.53 | Nonpriority creditor's name and mailing address MILJOCO 200 Elizabeth St. Mt. Clemens, MI 48043 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$305.43 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| 3.54 | Nonpriority creditor's name and mailing address Minkota Tech 201 Ross Ave Erskine, MN 56535 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,032.26 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| Debtor | Eagle Manufacturing, Inc. <small>Name</small> | Case number (if known) _____ |
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| 3.55 | Nonpriority creditor's name and mailing address Minn. N. Railroad, Inc. C/O Railroad ABC Orange Park, FL 32067-2475 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$9,218.50 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| 3.56 | Nonpriority creditor's name and mailing address Motion Industries, Inc. PO Box 98412 Chicago, IL 60693-8412 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,625.03 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| 3.57 | Nonpriority creditor's name and mailing address Motovario Corp 1440 Bluegrass Lakes PKWY Alpharetta, GA 30004 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,877.81 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| 3.58 | Nonpriority creditor's name and mailing address Neustel Law Offices, LTD 2534 S University Dr Ste 4 Fargo, ND 58103 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$333.23 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| 3.59 | Nonpriority creditor's name and mailing address North 2nd St Steel Supply Inc. PO Box 583598 Minneapolis, MN 55458 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$420.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| 3.60 | Nonpriority creditor's name and mailing address Northern Plains Steel 3801 15th Ave North Fargo, ND 58102 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$273,669.20 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| 3.61 | Nonpriority creditor's name and mailing address Northland Steel & Trim 9262 93rd Ave SE Fullerton, ND 58441-9774 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$75,546.93 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| Debtor | Eagle Manufacturing, Inc. <small>Name</small> | Case number (if known) _____ |
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| 3.62 | Nonpriority creditor's name and mailing address Northwest Beverage, Inc. PO Box 575 Thief River Falls, MN 56701 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$987.94 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| 3.63 | Nonpriority creditor's name and mailing address Northwest Power Systems 204 Atlantic Ave Thief River Falls, MN 56701 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$272.67 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| 3.64 | Nonpriority creditor's name and mailing address Otter Tail Power Co. PO Box 2002 Fergus Falls, MN 56538-2002 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$9,863.13 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| 3.65 | Nonpriority creditor's name and mailing address P-Tech USA 1632 Hobbs Dr, Unit B Delavan, WI 53115 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$57,763.33 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| 3.66 | Nonpriority creditor's name and mailing address Performance Indust. Prod. LLC 234 Wendt Drive Waupaca, WI 54981 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$9,893.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| 3.67 | Nonpriority creditor's name and mailing address Pitney Bowes Purch Power PO Box 371874 Pittsburgh, PA 15250-7874 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,832.33 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| 3.68 | Nonpriority creditor's name and mailing address PRAXAIR DISTRIBUTING INC 2205 N Washington St Grand Forks, ND 58203 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$11,366.47 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| Debtor | Eagle Manufacturing, Inc. <small>Name</small> | Case number (if known) _____ |
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| 3.69 | Nonpriority creditor's name and mailing address Range PO Box 978 Brainerd, MN 56401-4400 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,896.94 |
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| 3.70 | Nonpriority creditor's name and mailing address Red Lake Falls Hardware Hank 105 International Dr. Red Lake Falls, MN 56750 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,958.10 |
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| 3.71 | Nonpriority creditor's name and mailing address Red Lake Falls Utilities PO Box 37 Red Lake Falls, MN 56750 Date(s) debt was incurred <u>33545</u> Last 4 digits of account number <u>3530</u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Utility Bill</u> Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes | \$3,646.70 |
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| 3.72 | Nonpriority creditor's name and mailing address Richards Publishing Co Inc. PO Box 159 Gonvick, MN 56644-0159 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,794.41 |
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| 3.73 | Nonpriority creditor's name and mailing address Sanitary Service & Recycling PO Box 459 Red Lake Falls, MN 56750 Date(s) debt was incurred <u>09/30/2020</u> Last 4 digits of account number <u>N/A</u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Garbage & recycling</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,751.48 |
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| 3.74 | Nonpriority creditor's name and mailing address Sapientia Law Group 120 S 6th St Ste 100 Minneapolis, MN 55402 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,090.00 |
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| 3.75 | Nonpriority creditor's name and mailing address Security Chimneys Intl USA LTD PO Box 6846 Carol Stream, IL 60197-6846 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$395.78 |
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| Debtor | Eagle Manufacturing, Inc. <small>Name</small> | Case number (if known) _____ |
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| 3.76 | Nonpriority creditor's name and mailing address Selkirk Corporation PO Box 732689 Dallas, TX 75373-2689 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$32,503.23 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| 3.77 | Nonpriority creditor's name and mailing address Shareholders Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$383,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Shareholder Loans</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| 3.78 | Nonpriority creditor's name and mailing address Sherwin-Williams 920 Main Ave Fargo, ND 58103 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,292.60 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
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| 3.79 | Nonpriority creditor's name and mailing address Small Business Administration 409 3rd St SW Washington, DC 20416 Date(s) debt was incurred <u>2000</u> Last 4 digits of account number <u>7400</u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$150,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EIDL</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
|------|---|---|

| | | |
|------|--|--|
| 3.80 | Nonpriority creditor's name and mailing address Small Business Administration 14925 Kingsport Rd Fort Worth, TX 76155 Date(s) debt was incurred <u>March 2020</u> Last 4 digits of account number <u>133,0000</u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$133,100.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>PPP Loan (forgiveness applied for</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
|------|--|--|

| | | |
|------|--|---|
| 3.81 | Nonpriority creditor's name and mailing address Smith-Sharpe Fire Brick Sup. 2129 Broadway St NE Minneapolis, MN 55413-1716 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$900.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
|------|--|---|

| | | |
|------|---|---|
| 3.82 | Nonpriority creditor's name and mailing address SOS Products PO Box 47 East Greenville, PA 18041 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,399.40 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
|------|---|---|

| | | |
|--------|---|------------------------------|
| Debtor | Eagle Manufacturing, Inc. <small>Name</small> | Case number (if known) _____ |
|--------|---|------------------------------|

| | | | |
|-------|---|---|---------------------|
| 3.83 | Nonpriority creditor's name and mailing address Spee-Dee Delivery Serv. Inc. PO Box 1417 St Cloud, MN 56302-1417 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$6,500.00 |
| <hr/> | | | |
| 3.84 | Nonpriority creditor's name and mailing address SST Sensing Limited 5 Hagmill Crescent Coatbridge, Lanarkshire ML5 4NS Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,998.40 |
| <hr/> | | | |
| 3.85 | Nonpriority creditor's name and mailing address St Hilaire Supply Co. 211 Broadway Ave N St Hilaire, MN 56754 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$121,267.53 |
| <hr/> | | | |
| 3.86 | Nonpriority creditor's name and mailing address Staples PO Box 83689 Chicago, IL 60696-3689 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,528.88 |
| <hr/> | | | |
| 3.87 | Nonpriority creditor's name and mailing address Stoneridge Software LLC 1320 1st Ave N Fargo, ND 58102 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,575.00 |
| <hr/> | | | |
| 3.88 | Nonpriority creditor's name and mailing address Superior Lamp Inc. PO Box 2123 Fargo, ND 58107-2123 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$342.07 |
| <hr/> | | | |
| 3.89 | Nonpriority creditor's name and mailing address SWS Credit Services Inc PO Box 1096 Devils Lake, ND 58301 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$168.00 |

| | | |
|--------|---|------------------------------|
| Debtor | Eagle Manufacturing, Inc. <small>Name</small> | Case number (if known) _____ |
|--------|---|------------------------------|

| | | | |
|------|--|---|-------------------|
| 3.90 | Nonpriority creditor's name and mailing address Synergy Catalyst 1122 West Bethel Rd No.400 Coppell, TX 75019 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,865.00 |
|------|--|---|-------------------|

| | | | |
|------|--|---|-------------------|
| 3.91 | Nonpriority creditor's name and mailing address T & T Freightways Inc. PO Box 70 Independence, KY 41051 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,550.00 |
|------|--|---|-------------------|

| | | | |
|------|---|---|---------------------|
| 3.92 | Nonpriority creditor's name and mailing address Taco, Inc. PO Box 845637 Boston, MA 02284-5637 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$177,307.23 |
|------|---|---|---------------------|

| | | | |
|------|---|---|-------------------|
| 3.93 | Nonpriority creditor's name and mailing address Temperature Specialists, Inc. 3175 Bridge Street NW St. Francis, MN 55070-9612 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,600.00 |
|------|---|---|-------------------|

| | | | |
|------|---|---|-------------------|
| 3.94 | Nonpriority creditor's name and mailing address Thermtrol Corp. Dept 781580 Detroit, MI 48278-1580 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,800.00 |
|------|---|---|-------------------|

| | | | |
|------|--|---|-----------------|
| 3.95 | Nonpriority creditor's name and mailing address Thuemling Industrial Prod PO Box 1625 Waukesha, WI 53187-1625 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$899.32 |
|------|--|---|-----------------|

| | | | |
|------|---|---|-----------------|
| 3.96 | Nonpriority creditor's name and mailing address Tjernlund Products, Inc. 1601 Ninth St White Bear Lake, MN 55110 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$371.41 |
|------|---|---|-----------------|

| | | |
|--------|---|------------------------------|
| Debtor | Eagle Manufacturing, Inc. <small>Name</small> | Case number (if known) _____ |
|--------|---|------------------------------|

| | | |
|-------|---|---|
| 3.97 | Nonpriority creditor's name and mailing address Uline PO Box 88741 Chicago, IL 60680-1741 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,300.52 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.98 | Nonpriority creditor's name and mailing address Underwriters Labs, Inc. 75 Remittance Drive Chicago, IL 60675-1524 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,592.25 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.99 | Nonpriority creditor's name and mailing address Universal Screenprint PO Box 501 Thief River Falls, MN 56701 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$432.52 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.100 | Nonpriority creditor's name and mailing address UPS Freight 28013 Network Place Chicago, IL 60673-1280 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$177.90 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.101 | Nonpriority creditor's name and mailing address UPS Supply Chain Sol., Inc. 28013 Network Place Chicago, IL 60673-1280 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$47.89 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.102 | Nonpriority creditor's name and mailing address US Bank PO Box 108 St. Louis, MO 63166-0108 Date(s) debt was incurred <u>Date Opened: 02/1/2000</u> Last Used: 08/28/2020 Last 4 digits of account number <u>1774</u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$50,952.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Company account with multiple cardholders. 308,721 travel points balance.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.103 | Nonpriority creditor's name and mailing address Valley Cartage & Warehousing PO Box 64080 St. Paul, MN 55164-4080 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$800.40 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor **Eagle Manufacturing, Inc.**
Name

Case number (if known)

| | |
|--|---|
| <p>3.104 Nonpriority creditor's name and mailing address Washburn Iron Works, Inc. 112 E. Bayfield Street Washburn, WI 54891 Date(s) debt was incurred ____ Last 4 digits of account number ____</p> | <p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$229.86</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: ____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> |
| <p>3.105 Nonpriority creditor's name and mailing address WF Commercial Finance PO Box 206740 Dallas, TX 75320-6740 Date(s) debt was incurred ____ Last 4 digits of account number ____</p> | <p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,051.06</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: ____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> |
| <p>3.106 Nonpriority creditor's name and mailing address Young Mfg, Inc. 2331 N 42nd St Grand Forks, ND 58203 Date(s) debt was incurred ____ Last 4 digits of account number ____</p> | <p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$34,530.09</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: ____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> |

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

| | Name and mailing address | On which line in Part 1 or Part 2 is the related creditor (if any) listed? | Last 4 digits of account number, if any |
|-----|--|--|---|
| 4.1 | GREGERSON, ROSOW, JOHNSON & NI Attn: Nicolas Sideras 100 Washington Ave S. Ste 1550 Minneapolis, MN 55401 | Line <u>3.65</u> <input type="checkbox"/> Not listed. Explain ____ | — |
| 4.2 | NICHOLAS JAMES SIDERAS 4408 S MAGNOLIA A VENUE Sioux Falls, SD 57103 | Line <u>3.65</u> <input type="checkbox"/> Not listed. Explain ____ | — |
| 4.3 | Small Business Administration 14925 Kingsport Rd Fort Worth, TX 76155-2243 | Line <u>3.79</u> <input type="checkbox"/> Not listed. Explain ____ | <u>7400</u> |

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

| | | |
|-----|-------------------------------|------------------------|
| | Total of claim amounts | |
| 5a. | \$ | <u>20,694.83</u> |
| 5b. | + | \$ <u>1,882,622.38</u> |

| | | |
|-----|----|---------------------|
| 5c. | \$ | <u>1,903,317.21</u> |
|-----|----|---------------------|

Fill in this information to identify the case:

Debtor name **Eagle Manufacturing, Inc.**

United States Bankruptcy Court for the: **DISTRICT OF MINNESOTA**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

Property

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest **Copier Lease @ \$700/month.**

State the term remaining **34 Months**

List the contract number of any government contract _____

**Advanced Business Methods
875 North 42nd St
Grand Forks, ND 58203**

2.2. State what the contract or lease is for and the nature of the debtor's interest **Real Estate Listing Contract**

State the term remaining _____

List the contract number of any government contract _____

**Berkshire Hathaway Realty
1725 32nd Ave. S
Grand Forks, ND 58201**

Fill in this information to identify the case:

Debtor name **Eagle Manufacturing, Inc.**

United States Bankruptcy Court for the: **DISTRICT OF MINNESOTA**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.

☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 **Bruce Gagner**

**623 Mill St. NW
Red Lake Falls, MN 56750**

Ultima Bank MN

☒ D **2.2**
☐ E/F _____
☐ G _____

2.2 **Bruce Gagner**

**Northwest Regional
Development**

☒ D **2.1**
☐ E/F _____
☐ G _____

2.3 **Charles "Chuck"
Gagner**

**Northwest Regional
Development**

☒ D **2.1**
☐ E/F _____
☐ G _____

2.4 **Chuck Gagner**

**23729 Oak Lake Trl SE
Erskine, MN 56535**

Ultima Bank MN

☒ D **2.2**
☐ E/F _____
☐ G _____

2.5 **Ron Gagner**

Ultima Bank

☐ D _____
☐ E/F _____
☐ G _____

Debtor Eagle Manufacturing, Inc. Case number (if known) _____

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

| | | | |
|-----|----------------------|---|--|
| 2.6 | Ronald Gagner | Northwest Regional Development | <input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____ |
|-----|----------------------|---|--|

| | | | |
|-----|----------------------|-----------------------|--|
| 2.7 | Ronald Gagner | Ultima Bank MN | <input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____ |
|-----|----------------------|-----------------------|--|

Fill in this information to identify the case:

Debtor name Eagle Manufacturing, Inc.

United States Bankruptcy Court for the: DISTRICT OF MINNESOTA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

From the beginning of the fiscal year to filing date:
From 1/01/2020 to **Filing Date**

Sources of revenue
Check all that apply

☒ Operating a business

☐ Other _____

Gross revenue
(before deductions and exclusions)

\$624,317.43

For prior year:
From 1/01/2019 to 12/31/2019

☒ Operating a business

☐ Other _____

\$3,673,509.00

For year before that:
From 1/01/2018 to 12/31/2018

☒ Operating a business

☐ Other _____

\$5,718,714.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☐ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:
From 1/01/2020 to **Filing Date**

Sale of Assets to Reduce Debt

\$1,560,000.00

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

Debtor **Eagle Manufacturing, Inc.**

Case number (if known) _____

☐ None.

| Creditor's Name and Address | Dates | Total amount of value | Reasons for payment or transfer <i>Check all that apply</i> |
|--|-------|-----------------------|--|
| 3.1. See Attached Checking Account Register | | \$0.00 | <input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___ |

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None.

| Insider's name and address Relationship to debtor | Dates | Total amount of value | Reasons for payment or transfer |
|--|-------|-----------------------|---------------------------------|
|--|-------|-----------------------|---------------------------------|

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

| Creditor's name and address | Describe of the Property | Date | Value of property |
|-----------------------------|--------------------------|------|-------------------|
|-----------------------------|--------------------------|------|-------------------|

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

| Creditor's name and address | Description of the action creditor took | Date action was taken | Amount |
|-----------------------------|---|-----------------------|--------|
|-----------------------------|---|-----------------------|--------|

Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

| Case title Case number | Nature of case | Court or agency's name and address | Status of case |
|--|--|---------------------------------------|---|
| 7.1. China Motors and Components, Inc., d/b/a P-Tech USA v. Eagle Manufacturing, Inc Court File No.: 63-CV-20-143 | Contract Collection Action, Foreign Judgment Pending entry. | Red Lake County District Court | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded |

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

Debtor **Eagle Manufacturing, Inc.**

Case number (if known) _____

☒ None**Part 4: Certain Gifts and Charitable Contributions**

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

☒ None

| Recipient's name and address | Description of the gifts or contributions | Dates given | Value |
|------------------------------|---|-------------|-------|
|------------------------------|---|-------------|-------|

Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

☒ None

| Description of the property lost and how the loss occurred | Amount of payments received for the loss <small>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</small> | Dates of loss | Value of property lost |
|--|--|---------------|------------------------|
|--|--|---------------|------------------------|

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

| Who was paid or who received the transfer? Address | If not money, describe any property transferred | Dates | Total amount or value |
|--|---|---------|-----------------------|
| 11.1. Kenneth C. Edstrom Sapientia Law Group 120 S 6th St Ste 100 Minneapolis, MN 55402 | | Various | \$10,000.00 |
| Email or website address | | | |
| Who made the payment, if not debtor? | | | |

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.
Do not include transfers already listed on this statement.

☒ None.

| Name of trust or device | Describe any property transferred | Dates transfers were made | Total amount or value |
|-------------------------|-----------------------------------|---------------------------|-----------------------|
|-------------------------|-----------------------------------|---------------------------|-----------------------|

13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

Debtor **Eagle Manufacturing, Inc.** Case number (if known) _____

☐ None.

| | Who received transfer? Address | Description of property transferred or payments received or debts paid in exchange | Date transfer was made | Total amount or value |
|------|-----------------------------------|---|---------------------------|--------------------------|
| 13.1 | Woodmaster Inc. | Wood Pellet Stove Business. Proceeds used to pay down secured debt. | January 2020 | \$1,500,000.00 |
| | Relationship to debtor | | | |
| 13.2 | Various Parties | Auction of obsolete inventory. Proceeds used to pay down secured debt and for operating capital. | September 2020 | \$58,584.00 |
| | Relationship to debtor | | | |

Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

| Address | Dates of occupancy From-To |
|---------|-------------------------------|
|---------|-------------------------------|

Part 8: Health Care Bankruptcies

15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:
- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
☐ Yes. Fill in the information below.

| Facility name and address | Nature of the business operation, including type of services the debtor provides | If debtor provides meals and housing, number of patients in debtor's care |
|---------------------------|---|---|
|---------------------------|---|---|

Part 9: Personally Identifiable Information

16. Does the debtor collect and retain personally identifiable information of customers?

- ☒ No.
☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☐ No. Go to Part 10.
☒ Yes. Does the debtor serve as plan administrator?

- ☐ No Go to Part 10.
☒ Yes. Fill in below:

| Name of plan | Employer identification number of the plan EIN: |
|-----------------------|--|
| Cafeteria Plan | |

Has the plan been terminated?

☒ No

Debtor **Eagle Manufacturing, Inc.**

Case number (if known) _____

☐ Yes☐ No Go to Part 10.☒ Yes. Fill in below:

Name of plan

401K

Employer identification number of the plan

EIN: _____

Has the plan been terminated?

☒ No☐ Yes**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

Financial Institution name and Address

Last 4 digits of account number

Type of account or instrument

Date account was closed, sold, moved, or transferred

Last balance before closing or transfer

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address

Names of anyone with access to it
Address

Description of the contents

Do you still have it?

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address

Names of anyone with access to it

Description of the contents

Do you still have it?

Storage building on Railroad Property**Debtor.****misc.**☐ No
☒ Yes**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None

Owner's name and address

Woodmaster

Location of the property

Debtor

Describe the property

Stove Inventory

Value

Unknown**Part 12: Details About Environment Information**

Debtor **Eagle Manufacturing, Inc.**

Case number (if known) _____

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.**Report all notices, releases, and proceedings known, regardless of when they occurred.****22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

- ☒ No.
☐ Yes. Provide details below.

| Case title Case number | Court or agency name and address | Nature of the case | Status of case |
|---------------------------|-------------------------------------|--------------------|----------------|
|---------------------------|-------------------------------------|--------------------|----------------|

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

| Site name and address | Governmental unit name and address | Environmental law, if known | Date of notice |
|-----------------------|---------------------------------------|-----------------------------|----------------|
|-----------------------|---------------------------------------|-----------------------------|----------------|

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

| Site name and address | Governmental unit name and address | Environmental law, if known | Date of notice |
|-----------------------|---------------------------------------|-----------------------------|----------------|
|-----------------------|---------------------------------------|-----------------------------|----------------|

Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

| Business name address | Describe the nature of the business | Employer Identification number Do not include Social Security number or ITIN. | Dates business existed |
|-----------------------|-------------------------------------|--|------------------------|
|-----------------------|-------------------------------------|--|------------------------|

26. Books, records, and financial statements**26a.** List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

| Name and address | Date of service From-To |
|---|----------------------------|
| 26a.1. Raymond B. Safranski Benton, Safranski & Co. LLP PO Box 637, 116 W. 3rd St. Thief River Falls, MN 56701 | |

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- ☒ None

Debtor **Eagle Manufacturing, Inc.**

Case number (if known)

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None

Name and address

If any books of account and records are unavailable, explain why

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None

Name and address

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory

Date of inventory

The dollar amount and basis (cost, market, or other basis) of each inventory

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

| Name | Address | Position and nature of any interest | % of interest, if any |
|--------------------------|---------|-------------------------------------|-----------------------|
| Bruce Gagner | | President | 1/3 owner |
| Ronald Gagner | | Secretary Treasurer, CFO | 1/3 owner |
| Charles ("Chuck") Gagner | | Owner | 1/3 owner |

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☒ No

☐ Yes. Identify below.

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☒ No

☐ Yes. Identify below.

Name and address of recipient

Amount of money or description and value of property

Dates

Reason for providing the value

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

☒ No

☐ Yes. Identify below.

Debtor **Eagle Manufacturing, Inc.**

Case number (if known)

Name of the parent corporation

Employer Identification number of the parent corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the parent corporation

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **November 6, 2020**

/s/ Ronald Gagner

Signature of individual signing on behalf of the debtor

Ronald Gagner

Printed name

Position or relationship to debtor **CFO**

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☐ No
☒ Yes

Ranges: From: To: Number From: To:
 Checkbook ID ULTIMA ULTIMA First Last
 Description First Last Date 8/1/2020 10/31/2020
 User-Defined 1 First Last Type First Last

Sorted By: Date
 Include Trx: Reconciled, Unreconciled, Voided

* Voided transaction ^ Cleared amount is different than posted amount

| Checkbook ID | Description | User-Defined 1 | Current Balance | | | | |
|----------------------|-------------------------|----------------|------------------------------|------------|---------------|--------------|-------------|
| Number | Date | Type | Paid To/Rcvd From | Reconciled | Origin | Payment | Deposit |
| ULTIMA | Ultima Checking Account | | | | | \$138,164.63 | |
| 0051942 | 8/3/2020 | WDL | The Cincinnati Insurance Co | Yes | PMPAY00000582 | \$8,764.00 | |
| 45166 | 8/3/2020 | CHK | Garden Valley Telephone | Yes | PMCHK00002371 | \$430.81 | |
| WDL000009545 | 8/3/2020 | WDL | NWRDC | Yes | CMTRX00007674 | \$472.30 | |
| 45167 | 8/4/2020 | CHK | Nelson, Terry | Yes | PMCHK00002372 | \$400.00 | |
| 45168 | 8/4/2020 | CHK | Bemidji Welders Supply, Inc. | Yes | PMCHK00002373 | \$4,129.31 | |
| WDL000009546 | 8/4/2020 | WDL | UniShippers | Yes | CMTRX00007674 | \$270.93 | |
| WDL000009547 | 8/4/2020 | WDL | ADP | Yes | CMTRX00007674 | \$797.22 | |
| XFR000009521 | 8/4/2020 | XFR | Transfer To US BANK VISA | Yes | CMXFR00001007 | \$1,000.00 | |
| WDL000009548 | 8/5/2020 | WDL | UBM | Yes | CMTRX00007674 | \$603.20 | |
| WDL000009549 | 8/5/2020 | WDL | ADP | Yes | CMTRX00007674 | \$416.66 | |
| 00000000000000001561 | 8/6/2020 | DEP | | Yes | CMDEP00005244 | | \$171.53 |
| WDL000009551 | 8/6/2020 | WDL | ADP | Yes | CMTRX00007674 | \$16.00 | |
| CASH | 8/10/2020 | WDL | ADP TotalSource | Yes | PMTRX00004539 | \$2,190.34 | |
| CASH | 8/10/2020 | WDL | ADP TotalSource | Yes | PMTRX00004541 | \$2,784.50 | |
| CASH | 8/11/2020 | WDL | ADP TotalSource | Yes | PMTRX00004565 | \$17,922.11 | |
| CASH | 8/11/2020 | WDL | ADP TotalSource | Yes | PMTRX00004566 | \$4,346.87 | |
| WDL000009552 | 8/11/2020 | WDL | UBM | Yes | CMTRX00007674 | \$30.00 | |
| 00000000000000001548 | 8/17/2020 | DEP | | Yes | CMDEP00005231 | | \$4,308.23 |
| 0051948 | 8/17/2020 | WDL | AT&T Mobility | Yes | PMPAY00000583 | \$339.88 | |
| * 45169 | 8/18/2020 | CHK | Taco, Inc. | Yes | PMCHK00002374 | | |
| 45170 | 8/18/2020 | CHK | Taco, Inc. | Yes | PMCHK00002375 | \$1,000.00 | |
| WDL000009553 | 8/18/2020 | WDL | ADP | Yes | CMTRX00007674 | \$857.90 | |
| WDL000009554 | 8/19/2020 | WDL | ADP | Yes | CMTRX00007674 | \$416.66 | |
| 00000000000000001562 | 8/21/2020 | DEP | | Yes | CMDEP00005244 | | \$83.20 |
| 45171 | 8/21/2020 | CHK | AFLAC | No | PMCHK00002376 | \$2,711.40 | |
| A3540 | 8/24/2020 | WDL | American Express/Blue | Yes | PMPAY00000592 | \$500.00 | |
| 00000000000000001549 | 8/25/2020 | DEP | | Yes | CMDEP00005232 | | \$22,438.70 |
| 11996 | 8/25/2020 | CHK | AGI Insurance | No | CMTRX00007680 | \$166.95 | |
| 45172 | 8/25/2020 | CHK | Red Lake Falls Hardware Hank | No | PMCHK00002377 | \$2,061.82 | |
| 45173 | 8/25/2020 | CHK | Auto Value | Yes | PMCHK00002378 | \$1,104.73 | |
| 45174 | 8/25/2020 | CHK | Minkota Tech | Yes | PMCHK00002379 | \$2,443.12 | |
| WDL000009562 | 8/25/2020 | WDL | MN Dept of Revenue | Yes | CMTRX00007676 | \$2.00 | |
| XFR000009526 | 8/25/2020 | XFR | Transfer To US BANK VISA | Yes | CMXFR00001010 | \$1,000.00 | |
| 00000000000000001553 | 8/26/2020 | DEP | | No | CMDEP00005235 | | |
| CASH | 8/26/2020 | WDL | ADP TotalSource | Yes | PMTRX00004568 | \$17,919.53 | |
| WDL000009556 | 8/26/2020 | WDL | UBM | Yes | CMTRX00007675 | \$30.00 | |
| WDL000009557 | 8/26/2020 | WDL | UPS | Yes | CMTRX00007675 | \$185.84 | |
| 45175 | 8/27/2020 | CHK | Northern Plains Steel | No | PMCHK00002380 | \$1,000.00 | |
| 00000000000000001552 | 8/28/2020 | DEP | | Yes | CMDEP00005235 | | \$9,795.45 |
| WDL000009558 | 8/28/2020 | WDL | ADP | Yes | CMTRX00007675 | \$341.09 | |
| CASH | 8/31/2020 | WDL | ADP TotalSource | Yes | PMTRX00004569 | \$2,262.91 | |
| IAJ000009563 | 8/31/2020 | IAJ | ADP | Yes | CMTRX00007676 | | \$20.00 |
| WDL000009559 | 8/31/2020 | WDL | UBM | Yes | CMTRX00007675 | \$30.00 | |
| WDL000009560 | 8/31/2020 | WDL | UBM | Yes | CMTRX00007675 | \$2,534.77 | |
| WDL000009561 | 8/31/2020 | WDL | UBM | Yes | CMTRX00007675 | \$10.00 | |
| WDL000009564 | 9/1/2020 | WDL | NWRDC | No | CMTRX00007677 | \$428.02 | |
| WDL000009565 | 9/1/2020 | WDL | ADP | No | CMTRX00007677 | \$884.37 | |
| 11997 | 9/2/2020 | CHK | Sapientia Law Firm | No | CMTRX00007680 | \$5,000.00 | |
| 45176 | 9/2/2020 | CHK | The Cincinnati Insurance Co | No | PMCHK00002381 | \$2,474.00 | |
| WDL000009566 | 9/2/2020 | WDL | ADP | No | CMTRX00007677 | \$124.32 | |

| Checkbook ID | Description | User-Defined 1 | Current Balance | | | |
|----------------------|-------------|----------------|------------------------------|-------------------|---------------|-------------|
| Number | Date | Type | Paid To/Rcvd From | Reconciled Origin | Payment | Deposit |
| WDL000009567 | 9/3/2020 | WDL | ADP | No | CMTRX00007677 | \$145.83 |
| 45177 | 9/4/2020 | CHK | Nelson, Terry | No | PMTRX00004542 | \$400.00 |
| 45178 | 9/4/2020 | CHK | Sjoberg's Cable TV | No | PMCHK00002382 | \$96.05 |
| WDL000009568 | 9/4/2020 | WDL | ADP | No | CMTRX00007677 | \$20.00 |
| 00000000000000001551 | 9/8/2020 | DEP | | No | CMDEP00005235 | \$12,004.35 |
| 45179 | 9/8/2020 | CHK | Garden Valley Telephone | No | PMCHK00002383 | \$331.32 |
| 45180 | 9/8/2020 | CHK | Bemidji Welders Supply, Inc. | No | PMCHK00002384 | \$4,179.86 |
| CASH | 9/8/2020 | WDL | ADP TotalSource | No | PMTRX00004570 | \$20,982.09 |
| CASH | 9/8/2020 | WDL | ADP TotalSource | No | PMTRX00004571 | \$3,422.78 |
| WDL000009569 | 9/8/2020 | WDL | UBM | No | CMTRX00007677 | \$30.00 |
| 00000000000000001550 | 9/10/2020 | DEP | | No | CMDEP00005235 | \$4,702.00 |
| WDL000009570 | 9/10/2020 | WDL | UBM | No | CMTRX00007677 | \$302.52 |
| WDL000009571 | 9/15/2020 | WDL | ADP | No | CMTRX00007677 | \$892.99 |
| WDL000009572 | 9/16/2020 | WDL | ADP | No | CMTRX00007677 | \$101.84 |
| 00000000000000001554 | 9/21/2020 | DEP | | No | CMDEP00005236 | \$30,933.20 |
| CASH | 9/21/2020 | WDL | ADP TotalSource | No | PMTRX00004572 | \$1,479.79 |
| WDL000009573 | 9/21/2020 | WDL | UBM | No | CMTRX00007677 | \$30.00 |
| 00000000000000001555 | 9/22/2020 | DEP | | No | CMDEP00005236 | \$2,000.00 |
| WDL000009574 | 9/22/2020 | WDL | MN Dept of Revenue | No | CMTRX00007677 | \$12.00 |
| A8860 | 9/23/2020 | WDL | American Express/Blue | No | PMPAY00000595 | \$500.00 |
| CASH | 9/23/2020 | WDL | ADP TotalSource | No | PMTRX00004573 | \$26,118.20 |
| WDL000009575 | 9/23/2020 | WDL | UBM | No | CMTRX00007677 | \$30.00 |
| WDL000009576 | 9/23/2020 | WDL | MN Dept of Revenue | No | CMTRX00007677 | \$4.03 |
| WDL000009577 | 9/23/2020 | WDL | MN Dept of Revenue | No | CMTRX00007677 | \$4.05 |
| WDL000009578 | 9/23/2020 | WDL | MN Dept of Revenue | No | CMTRX00007677 | \$28.13 |
| 00000000000000001556 | 9/24/2020 | DEP | | No | CMDEP00005237 | \$9,783.10 |
| 11998 | 9/28/2020 | CHK | Elavon | No | CMTRX00007680 | \$59.99 |
| 00000000000000001557 | 9/29/2020 | DEP | | No | CMDEP00005238 | \$8,716.98 |
| 429177864 | 9/29/2020 | IAJ | ADP | No | CMTRX00007678 | \$1,319.98 |
| WDL000009579 | 9/29/2020 | WDL | ADP | No | CMTRX00007678 | \$893.16 |
| CASH | 9/30/2020 | WDL | ADP TotalSource | No | PMTRX00004574 | \$2,262.91 |
| WDL000009580 | 9/30/2020 | WDL | UBM | No | CMTRX00007678 | \$30.00 |
| WDL000009581 | 9/30/2020 | WDL | UBM | No | CMTRX00007678 | \$2,534.77 |
| WDL000009582 | 9/30/2020 | WDL | UBM | No | CMTRX00007678 | \$17.20 |
| 00000000000000001567 | 10/1/2020 | DEP | | No | CMDEP00005248 | \$14,985.00 |
| * 45181 | 10/2/2020 | CHK | Smith-Sharpe Fire Brick Supp | Yes | PMCHK00002385 | |
| 45182 | 10/2/2020 | CHK | Smith-Sharpe Fire Brick Supp | No | PMCHK00002386 | \$100.00 |
| 45183 | 10/6/2020 | CHK | Central Boiler | No | PMCHK00002387 | \$375.00 |
| 00000000000000001558 | 10/7/2020 | DEP | | No | CMDEP00005241 | \$5,033.27 |
| 00000000000000001560 | 10/8/2020 | DEP | | No | CMDEP00005243 | \$16,671.65 |
| 45184 | 10/8/2020 | CHK | Bemidji Welders Supply, Inc. | No | PMCHK00002388 | \$9,281.58 |
| 00000000000000001559 | 10/13/2020 | DEP | | No | CMDEP00005242 | \$38,663.74 |
| 45185 | 10/14/2020 | CHK | Garden Valley Telephone | No | PMCHK00002389 | \$387.94 |
| 45186 | 10/14/2020 | CHK | Advanced Business Methods | No | PMCHK00002390 | \$1,403.64 |
| 45187 | 10/14/2020 | CHK | Underwriters Laboratories, I | No | PMCHK00002391 | \$1,756.00 |
| 00000000000000001565 | 10/15/2020 | DEP | | No | CMDEP00005246 | \$5,500.00 |
| 00000000000000001563 | 10/20/2020 | DEP | | No | CMDEP00005245 | \$28,085.27 |
| 45188 | 10/20/2020 | CHK | St Hilaire Supply Co. | No | PMCHK00002392 | \$124.78 |
| 45189 | 10/22/2020 | CHK | Nelson, Terry | No | PMCHK00002393 | \$800.00 |
| 00000000000000001564 | 10/23/2020 | DEP | | No | CMDEP00005245 | \$16,949.00 |
| 45190 | 10/23/2020 | CHK | Garden Valley Telephone | No | PMCHK00002394 | \$361.76 |
| 30046544117 | 10/26/2020 | WDL | Otter Tail Power Company | No | PMPAY00000591 | \$238.23 |
| 30046638918 | 10/26/2020 | WDL | Otter Tail Power Company | No | PMPAY00000591 | \$316.19 |
| 45191 | 10/30/2020 | CHK | Acme Electric | No | PMCHK00002395 | \$397.48 |
| 45192 | 10/30/2020 | CHK | Acme Tools | No | PMCHK00002395 | \$10.02 |
| 45193 | 10/30/2020 | CHK | Alps Controls | No | PMCHK00002395 | \$233.18 |
| 45194 | 10/30/2020 | CHK | Wichtaskservice LLC | No | PMCHK00002395 | \$340.33 |
| 45195 | 10/30/2020 | CHK | Brent's Food Pride | No | PMCHK00002395 | \$105.92 |
| 45196 | 10/30/2020 | CHK | Crookston Daily Times | No | PMCHK00002395 | \$407.50 |
| 45197 | 10/30/2020 | CHK | Falls Building Center | No | PMCHK00002395 | \$60.79 |
| 45198 | 10/30/2020 | CHK | Garden Valley Telephone | No | PMCHK00002395 | \$362.00 |
| 45199 | 10/30/2020 | CHK | Landman Publishing, LLC | No | PMCHK00002395 | \$125.00 |

| Checkbook ID | Description | User-Defined 1 | | | Current Balance | |
|--------------|----------------------|----------------|------------------------------|-------------------------|-----------------|--------------|
| Number | Date | Type | Paid To/Rcvd From | Reconciled Origin | Payment | Deposit |
| 45200 | 10/30/2020 | CHK | LaserSharp Creations | No | PMCHK00002395 | \$512.00 |
| 45201 | 10/30/2020 | CHK | On-Site Medical Services Inc | No | PMCHK00002395 | \$400.00 |
| 45202 | 10/30/2020 | CHK | Red Lake County Environmenta | No | PMCHK00002395 | \$70.34 |
| 45203 | 10/30/2020 | CHK | Sanitary Service | No | PMCHK00002395 | \$561.03 |
| 45204 | 10/30/2020 | CHK | Schafer Electric | No | PMCHK00002395 | \$938.20 |
| 45205 | 10/30/2020 | CHK | The Times | No | PMCHK00002395 | \$405.48 |
| 45206 | 10/30/2020 | CHK | Wilcox Plumbing & Heating | No | PMCHK00002395 | \$312.01 |
| 45207 | 10/30/2020 | CHK | Auto Value | No | PMCHK00002395 | \$454.58 |
| 120 | Transaction(s) | | | Total Payments/Deposits | \$176,154.05 | \$232,164.65 |
| 120 | Total Transaction(s) | | | | | |

LOCAL FORM 1007-1
REVISED 06/16

**United States Bankruptcy Court
District of Minnesota**

In re **Eagle Manufacturing, Inc.**

Debtor(s)

Case No.

Chapter

11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

■ FLAT FEE

| | | |
|---|----|------------------|
| For legal Services, I have agreed to accept | \$ | 10,000.00 |
| Prior to the filing of this statement I have received | \$ | 10,000.00 |
| Balance Due | \$ | 0.00 |

□ RETAINER

| | | |
|---|----|-------|
| For legal Services, I have agreed to accept | \$ | _____ |
| Prior to the filing of this statement I have received | \$ | _____ |

[Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.

2. The source of the compensation paid to me was:

☐ Debtor ☒ Other (specify) **Debtor. Retainer paid. Hourly rate for future work will be by the hour at \$450.00**

3. The source of the compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people or entities sharing in the compensation, is attached.

5. In return for the above-disclosed fee, together with such further fee, if any, as is provided in the written contract required by 11 U.S.C. § 528(a)(1), I have agreed to render legal service for all aspects of the bankruptcy case, including:

A. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;

B. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;

C. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

D. Representation of the debtor in contested bankruptcy matters; and

E. Other services reasonably necessary to represent the debtor(s).

LOCAL FORM 1007-1
REVISED 06/16

6. Pursuant to Local Rules 1007-1 and 1007-3-1, I have advised the debtor of the requirements in the Statement of Financial Affairs to disclose all payments made, or property transferred, by or on behalf of the debtor to any person, including attorneys, for consultation concerning debt consolidation or reorganization, relief under bankruptcy law, or preparation of a petition in bankruptcy. I have reviewed the debtor's disclosures and they are accurate and complete to the best of my knowledge.

CERTIFICATION

I certify that the foregoing, together with the written contract required by 11 U.S.C. §528(a)(1), is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy case.

Dated: **November 6, 2020**

Signature of Attorney
/s/ Kenneth C. Edstrom

Kenneth C. Edstrom 148696

**United States Bankruptcy Court
District of Minnesota**

In re **Eagle Manufacturing, Inc.**

Debtor(s)

Case No.
Chapter

11

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

| Name and last known address or place of business of holder | Security Class | Number of Securities | Kind of Interest |
|--|----------------|----------------------|------------------|
| Bruce Gagner | | | 1/3 Owner |
| Charles "Chuck" Gagner | | | 1/3 Owner |
| Ron Gagner | | | 1/3 Owner |

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **CFO** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **November 6, 2020**

Signature **/s/ Ronald Gagner**
Ronald Gagner

Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

3M CENTER
PO BOX 844127
DALLAS TX 75284-4127

ACCURATE FASTENING SOLUTIONS
9775 85TH AVE N
MAPLE GROVE MN 55369

ADVANCED BUSINESS METHODS
875 NORTH 42ND ST
GRAND FORKS ND 58203

ADVANCED TIRE & AUTO
323 N BROADWAY
CROOKSTON MN 56716

ADVNCED BUS. METHODS
1515 13TH AVE E
WEST FARGO ND 58078

AIS
PO BOX 86
MINNEAPOLIS MN 55486

AMERICAN EXPRESS
PO BOX 53779
PHOENIX AZ 85027

AMERICAN SEALANTS INC.
9190 YEAGER LANE
FORT WAYNE IN 46809

AMERIPRIDE
PO BOX 950
BEMIDJI MN 56619-0950

ASSOC. GRAPHIC ARTS, INC.
820 5TH ST NW
FARIBAULT MN 55021

AT&T MOBILITY
PO BOX 6463
CAROL STREAM IL 60197-6463

AUTO VALUE
PO BOX 127
RED LAKE FALLS MN 56750-0127

BACO CONTROLS
8431 LOOP ROAD
BALDWINVILLE NY 13027

BADGER INSULATED PIPE LLC
W8359 STATE RD 82 W
MAUSTON WI 53948

BBI INTERNATIONAL
308 2ND AVE N, STE 304
GRAND FORKS ND 58203

BECKER AGG. TRUCKING, INC.
PO BOX 249
PIERZ MN 56364

BELLOFRAM SILICONES, INC.
PO BOX 74733
CLEVELAND OH 44194-4733

BERKSHIRE HATHAWAY REALTY
1725 32ND AVE. S
GRAND FORKS ND 58201

BREAN MARKETING INC.
880 - 330 ST. MARY AVE.
WINNIPEG, MB R3C 3Z5 CANADA

BRUCE GAGNER
623 MILL ST. NW
RED LAKE FALLS MN 56750

BRUCE GAGNER

CHICAGO TUBE & IRON
PO BOX 1450
MINNEAPOLIS MN 05548-5126

CHUCK GAGNER
23729 OAK LAKE TRL SE
ERSKINE MN 56535

CINCINNATI FAN C/O GLACIER TECH INC.
PO BOX 640338
CINCINNATI OH 45264-0338

CLIMATECH
6950 WASHINGTON AVE S
EDEN PRAIRIE MN 55344

CREDITSAFE USA INC.
PO BOX 789985
PHILADELPHIA PA 19178-9985

CSA GROUP TESTING & CERT. INC.
PO BOX 74007292
CHICAGO IL 60674-7292

DIAMOND VOGEL PAINTS
PO BOX 380
ORANGE CITY IA 51041

DIGI-KEY
AR 748033
THIEF RIVER FALLS MN 56701-0250

DUBOIS CHEMICALS INC.
2659 SOLUTION CENTER
CHICAGO IL 60677-2006

EASY HEAT WOOD PELLETS
PO BOX 15
DUBLIN OH 43017

EMERSON COMM'L & RES SOLUTIONS
1065 BIG SHANTY RD NW
KENNESAW GA 30144-7038

EMPLOYEES OF DEBTOR

FALCON INDUSTRIES, INC.
PO BOX 74350
CLEVELAND OH 44194-4350

FASTENAL COMPANY
PO BOX 1286
WINONA MN 55987-0978

FEDEX FREIGHT EAST
PO BOX 10306
PALATINE IL 60055-0306

FISCHER, RUST, & STOCK, PLLC
PO BOX 605
CROOKSTON MN 56716

FORKLIFTS OF MN, INC.
2201 W 94TH ST
BLOOMINGTON MN 55431

FOURMATION SALES
PO BOX 602903
CHARLOTTE NC 28260-2903

GRAINGER
DEPT. 823283601
PALATINE IL 60038-0001

GRAYBAR
12437 COLLECTIONS CTR DR
CHICAGO IL 60693-2437

GREATER BAY CAPITAL
PO BOX 7777
SAN FRANCISCO CA 94120-7777

GREGERSON, ROSOW, JOHNSON & NI
ATTN: NICOLAS SIDERAS
100 WASHINGTON AVE S. STE 1550
MINNEAPOLIS MN 55401

H-O-H WATER TECHNOLOGY, INC.
PO BOX 487
PALATINE IL 60078-0487

HARTZ TRUCK LINE, INC.
124 S STATE ST
THIEF RIVER FALLS MN 56701

HEAT TRANSFER GROUP, INC.
2211-C FIFTH AVENUE
RONKONKOMA NY 11779

HEATLINK GROUP, INC.
1774 PAYSPHERE CIRCLE
CHICAGO IL 60674

INSUL-SEAL INSULATED PVC
217 HARRISON ST N
RACINE MI 55967

JM STOFTEKNIK AB
MARTENSGATAN 8, 504 41
BORAS, SWEDEN

JOHNSTONE SUPPLY
1840 INDUSTRIAL BLVD.
MUSKEGON MI 49442-6112

KTRF RADIO
PO BOX 40
THIEF RIVER FALLS MN 56701

LAPHAM-HICKEY STEEL
LOCKBOX 774752
CHICAGO IL 60677-4007

M.G.M. ELEC MOTORS USA INC.
24715 CRESTVIEW COURT
FARMINGTON HILLS MI 48335

MASTER ELECTRONICS
PO BOX 512639
LOS ANGELES CA 90051-0639

MCMASTER-CARR SUPPLY COMP.
PO BOX 7690
CHICAGO IL 60680-7690

MENARDS
3550 32ND AVE S.
GRAND FORKS ND 58201-5914

META 13
20 N BENTON DR
SAUK RAPIDS MN 56379

MIDWAY INDUSTRIAL SUPPLY CO.
PO BOX 73278
CLEVELAND OH 44193

MIDWEST TANK CO.
17368 197TH AVE.
BIG LAKE, MINNESOTA 55309-0000

MILJOCO
200 ELIZABETH ST.
MT. CLEMENS MI 48043

MINKOTA TECH
201 ROSS AVE
ERSKINE MN 56535

MINN. N. RAILROAD, INC.
C/O RAILROAD ABC
ORANGE PARK FL 32067-2475

MOTION INDUSTRIES, INC.
PO BOX 98412
CHICAGO IL 60693-8412

MOTOVARIO CORP
1440 BLUEGRASS LAKES PKWY
ALPHARETTA GA 30004

NEUSTEL LAW OFFICES, LTD
2534 S UNIVERSITY DR STE 4
FARGO ND 58103

NICHOLAS JAMES SIDERAS
4408 S MAGNOLIA A VENUE
SIOUX FALLS SD 57103

NORTH 2ND ST STEEL SUPPLY INC.
PO BOX 583598
MINNEAPOLIS MN 55458

NORTHERN PLAINS STEEL
3801 15TH AVE NORTH
FARGO ND 58102

NORTHLAND STEEL & TRIM
9262 93RD AVE SE
FULLERTON ND 58441-9774

NORTHWEST BEVERAGE, INC.
PO BOX 575
THIEF RIVER FALLS MN 56701

NORTHWEST POWER SYSTEMS
204 ATLANTIC AVE
THIEF RIVER FALLS MN 56701

NORTHWEST REGIONAL DEVELOPMENT
109 S. MINNESOTA ST.
WARREN MN 56762

OTTER TAIL POWER CO.
PO BOX 2002
FERGUS FALLS MN 56538-2002

P-TECH USA
1632 HOBBS DR, UNIT B
DEHAVAN WI 53115

PERFORMANCE INDUST. PROD. LLC
234 WENDT DRIVE
WAUPACA WI 54981

PITNEY BOWES PURCH POWER
PO BOX 371874
PITTSBURGH PA 15250-7874

PRAXAIR DISTRIBUTING INC
2205 N WASHINGTON ST
GRAND FORKS ND 58203

RANGE
PO BOX 978
BRainerd MN 56401-4400

RED LAKE COUNTY TREASURER
PO BOX 208
RED LAKE FALLS MN 56750

RED LAKE FALLS HARDWARE HANK
105 INTERNATIONAL DR.
RED LAKE FALLS MN 56750

RED LAKE FALLS UTILITIES
PO BOX 37
RED LAKE FALLS MN 56750

RICHARDS PUBLISHING CO INC.
PO BOX 159
GONVICK MN 56644-0159

SANITARY SERVICE & RECYCLING
PO BOX 459
RED LAKE FALLS MN 56750

SAPIENTIA LAW GROUP
120 S 6TH ST STE 100
MINNEAPOLIS MN 55402

SECURITY CHIMNEYS INTL USA LTD
PO BOX 6846
CAROL STREAM IL 60197-6846

SELKIRK CORPORATION
PO BOX 732689
DALLAS TX 75373-2689

SHERWIN-WILLIAMS
920 MAIN AVE
FARGO ND 58103

SMALL BUSINESS ADMINISTRATION
409 3RD ST SW
WASHINGTON DC 20416

SMALL BUSINESS ADMINISTRATION
14925 KINGSFORT RD
FORT WORTH TX 76155

SMALL BUSINESS ADMINISTRATION
14925 KINGSFORT RD
FORT WORTH TX 76155-2243

SMITH-SHARPE FIRE BRICK SUP.
2129 BROADWAY ST NE
MINNEAPOLIS MN 55413-1716

SOS PRODUCTS
PO BOX 47
EAST GREENVILLE PA 18041

SPEE-DEE DELIVERY SERV. INC.
PO BOX 1417
ST CLOUD MN 56302-1417

SST SENSING LIMITED
5 HAGMILL CRESCENT
COATBRIDGE, LANARKSHIRE ML5 4NS

ST HILAIRE SUPPLY CO.
211 BROADWAY AVE N
ST HILAIRE MN 56754

STAPLES
PO BOX 83689
CHICAGO IL 60696-3689

STATE OF MINNESOTA
600 NORTH ROBERT ST.
ST. PAUL MN 55101

STONERIDGE SOFTWARE LLC
1320 1ST AVE N
FARGO ND 58102

SUPERIOR LAMP INC.
PO BOX 2123
FARGO ND 58107-2123

SWS CREDIT SERVICES INC
PO BOX 1096
DEVILS LAKE ND 58301

SYNERGY CATALYST
1122 WEST BETHEL RD NO.400
COPPELL TX 75019

T & T FREIGHTWAYS INC.
PO BOX 70
INDEPENDENCE KY 41051

TACO, INC.
PO BOX 845637
BOSTON MA 02284-5637

TEMPERATURE SPECIALISTS, INC.
3175 BRIDGE STREET NW
ST. FRANCIS MN 55070-9612

THERMTROL CORP.
DEPT 781580
DETROIT MI 48278-1580

THUEMLING INDUSTRIAL PROD
PO BOX 1625
WAUKESHA WI 53187-1625

TJERNLUND PRODUCTS, INC.
1601 NINTH ST
WHITE BEAR LAKE MN 55110

ULINE
PO BOX 88741
CHICAGO IL 60680-1741

ULTIMA BANK MN
603 HILLIGOSS BLVD. SE
FOSSTON MN 56542

ULTIMA BANK, MN
603 HILLIGOSS BLVD. SE
FOSSTON MN 56542

UNDERWRITERS LABS, INC.
75 REMITTANCE DRIVE
CHICAGO IL 60675-1524

UNIVERSAL SCREENPRINT
PO BOX 501
THIEF RIVER FALLS MN 56701

UPS FREIGHT
28013 NETWORK PLACE
CHICAGO IL 60673-1280

UPS SUPPLY CHAIN SOL., INC.
28013 NETWORK PLACE
CHICAGO IL 60673-1280

US BANK
PO BOX 108
ST. LOUIS MO 63166-0108

VALLEY CARTAGE & WAREHOUSING
PO BOX 64080
ST. PAUL MN 55164-4080

WASHBURN IRON WORKS, INC.
112 E. BAYFIELD STREET
WASHBURN WI 54891

WF COMMERCIAL FINANCE
PO BOX 206740
DALLAS TX 75320-6740

YOUNG MFG, INC.
2331 N 42ND ST
GRAND FORKS ND 58203

**United States Bankruptcy Court
District of Minnesota**

In re **Eagle Manufacturing, Inc.**

Debtor(s)

Case No.

Chapter

11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Eagle Manufacturing, Inc.** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

Bruce Gagner

Charles "Chuck" Gagner

Ron Gagner

☐ None [Check if applicable]

November 6, 2020

Date

/s/ Kenneth C. Edstrom

Kenneth C. Edstrom 148696

Signature of Attorney or Litigant

Counsel for **Eagle Manufacturing, Inc.**

Sapientia Law Group

120 S 6th St Ste 100

Minneapolis, MN 55402

6127567100 Fax:6127567101

kene@sapientialaw.com